

DEPARTMENT OF PLANNING AND NATURAL RESOURCES APPLICATION FOR LONG-TERM ANCHORING VESSELS



LONG-TERM ANCHORING I

INSTRUCTIONS: ALL APPLIC	ANTS MUST PRI	NT ALL NECESSARY INFO	ORMATION IN A LEGIBLE MANNER.
Owner's Name (Last)			(First)
Home Address			
Current location of vessel to be	anchored		
Address while in the Virgin Islan	nds		
Zip Code		Telephone Number	
Name of Vessel	Color of Vessel		
Homeport			
Registration No.		Documentation No.	
Make of the Vessel	Builder/Manufacturer No. (H.I.N.)		
Type of Vessel (Check One):	Sail	Auxiliary	Power
			Draft
		OCATION REQUI	
1 St			
2 nd	ROTTO	m Type (i.e. sand, muc m Type (i.e. sand, muc	l, etc.)
Relocation	Altonotopymus.	ar The face count, and	
ST	ATUS OF	THE APPLICATI	ON
Original Appro	per month which is	non-refundable.	Relocation
Effective Date	Expira	ation Date	Fee \$
ANCHORING PERMITS MUST BE RENEWED EVERY MONTH			
		ON OF PERMIT	
NO ANCHORAGE IN GRASSBEDS WITHIN THE ANCHORAGE AREA	OR CORAL, CI	HANNELS OR FAIRWAY	S. ANCHORS SHALL BE PLACED SEL, IT'S TENDER(S) OR RIGGING
EXTENDED INTO A CHANNEL, FAIR IS NON-TRANSFERABLE.	WAY OR OTHER	R VESSEL'S MOORING OF	REL, IT'S TENDER(S) OR RIGGING RANCHORING AREA. THIS PERMIT
IONONANSPERABLE.			
I HEREBY CERTIFY that the foreg	oing information	provided is true and con	rect; and further, I agree to fully
comply with the statutes of the Virg Natural Resources related to Moori	in Islands and th	ne Rules and Regulations	of the department of Dianning and
Date:			
Location of Approved Anchoring:		D.	ate Approved:
Approved by: <u>Howard Forbes,</u> Sr		Title: Director	
A P. A QUALIFY. DOLOROO	O Marco Marc		